Laurens Central School PO Box 301 Laurens, NY

REQUEST FOR USE OF SCHOOL FACILITIES

(Building Use Form)

Please read carefully before you sign. Any damage incurred must be paid in full before the facilities can be used again. Please understand fully your responsibility toward the school. Any questions, please contact Buildings and Grounds office at 432-2050 Ext. 1160. Please complete form at least one (1) week before activity.

Facility Requested:					
		room, cafeteria, g			
Organization Requesting	<u> </u>				
Person in Charge:Name_					
	Address				
	Telephone				
	Email Address				
	Title in Organiz	zation			
Date(s) Requested					
	(if every week/	month, please sta	ate the beginning &	ending dates)	
Time: Set-up:	Start:_	·	Finish:	Final Clean-up Done:	
Number of persons invol-	ved:				
Admissions or Donations	Charged: Yes	No_			
Other pertinent informa	ation:				
Type of Activity					-
Purpose of Activity					_
Equipment to be used					_
Recommendation of Adn *The fee for use of facilit				on of Supervisor of B&Gelp, if needed.	
FEE SCHEDULE:	\$	per use each	ı time.		
Rental of Schoo Cafeter Gymna		n-School Groups \$50.00 \$50.00	s:		
Classro Multi-F	oom Purpose Room	\$20.00 \$150.00			

Custodian Service/Kitchen Help - 1.5 of hourly salary per person

NOTE: It is the responsibility of the person or organization making the request, to check with the Buildings and Grounds Office for approval. If an email address has been provided above, we will send you an email stating approval/disapproval.

The school district will not be responsible for any liability, injury, accident, damage or damage to personal property for any outside groups using the facilities.